								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									344/1486 NAN486					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			17				RAT	RATE FEE		1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE 385.00		OR	BASIC FEE	770.00			
TOTAL CHARGEABLE CLAIMS			/7 minus 20=		. 0		X\$ 9= 0		OR	X\$18=				
INDEPENDENT CLAIMS			v minus 3 =		٠ ي		X43= 0			OR	X86=			
ΜL	ILTIPLE DEPE	NDENT CLAIM P	RESENT				+145= 0			1	+290=	·		
•:11	*If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL 385		OR OR	TOTAL				
١	CLAIMS AS AMENDED - PART II						101	~L	205	Jon	OTHER	THAN		
0	104104	(Column 1)	(Column 2)			(Column 3)	n 3) SMAL		ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	- 1.7	Minus	H)	-\	X\$ 9	=		OR	X\$18=			
	Independent	1. 2	Minus	(2	<u> </u>	=	X43	=		OR	X86=			
1.0	FIRST PRESE	NTATION OF MU	JUTIPLE DEI	PENDENT	CLAIM		+145	=		OR	+290=			
,,								TAL			TOTAL			
		ADDIT. F	EE	,	,	ADDIT. FEE								
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER		(Colum HIGHE NUME	ST ER	(Column 3) PRESENT	RAT	_	ADDI- TIONAL		RATE	ADDI- TIONAL		
		AMENDMENT		PREVIO PAID F		EXTRA			FEE		·	FEE		
	Total	•	Minus	**		-	X\$ 9	= '		OR	X\$18=			
	Independent	* NTATION OF MU	Minus	ENDENT	CI AIM	-	X43:	-		OR	X86≐			
	1.1.01111202			LIVELIVI			+145	=		OR	+290=			
								AL EE		OR 2	TOTAL VOOIT, FEE			
•		(Column 1)		(Colum	ıu. 5)	(Column 3)	ADDIT. F	EE •	• .		WUII. FEEL	•		
,	`	CLAIMS	·	HIGHE	ST		F	. 1	ADDI-	ſ		ADDI-		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIOR PAID F	USLY	PRESENT EXTRA	RATE	:	TIONAL FEE		RATE	TIONAL FEE		
	Total	•	Minus	**		e .	X\$ 9-	.		OR	X\$18=			
	Ind pendent	•	Minus	***		=	X43=	+		.	.X86=			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4		OR	. 700=			
	the entry in eat-	+145=			OR	+290=	·							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT. FEE														
7	he "Highest Num	ber Previously Paid	For (Total or	Independer	it) is the	i o, enter 3.º highest number	found in the	app	priate box	in colu	mn 1.			

FORM PTO-875 (Rev. 10/03)

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